

Statement of Organization - Candidate Committee

Amendment
☐ Yes ☒ No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information					
a. Full Name Kim Sigmon for Clerk of Superior Court				c. ID Number	
b. Mailing Address (include City, State and Zip Code) PO Box 757 Conover, NC 28613				d. Date Organized May 28, 2013	
				e. Phone Number 828-465-7391	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee					
a. Full Name Kim Richards Sigmon			e. Candidate ID Number		f. Party Affiliation Republican (Indicate Non-partisan if applicable)
b. Mailing Address (include City, State, and Zip Code) PO Box 757 Conover, NC 28613			g. Office Sought Clerk of Superior Court, Catawba County		
c. Phone Number 828-465-7391	d. Email Address votesigmon@yahoo.com		h. Next Election Year 2014		i. Jurisdiction 25B
<input checked="" type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name Amy Harris Luckadoo			a. Full Name Amy Harris Luckadoo		
b. Mailing Address (include City, State, and Zip Code) 1161 18th Avenue NE Hickory, NC 28601			b. Mailing Address (include City, State, and Zip Code) 1161 18th Avenue NE Hickory, NC 28601		
c. Phone Number 828-320-7105	d. Email Address aluckadoo@embarqmail.com		c. Phone Number 828-320-7105	d. Email Address aluckadoo@embarqmail.com	
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Email copy of notices					
5. Assistant Treasurer Information			6. Account Information (incl. CRO-3500)		
a. Full Name Kim Richards Sigmon			a. Financial Institution Full Name Branch Banking & Trust Company		
b. Mailing Address (include City, State, and Zip Code) PO Box 757 Conover, NC 28613			b. Purpose Maintain campaign contributions and expenditures		
c. Phone Number 828-465-7391	d. Email Address votesigmon@yahoo.com		c. Account Code A	d. Type Checking	
<input checked="" type="checkbox"/> Email copy of notices					
CERTIFICATION					
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.					
Amy Harris Luckadoo Printed Name of Signer			Amy Harris Luckadoo Signature of Appointed Treasurer		June 5, 2013 Date



North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603



Kim Westbrook Strach
Executive Director

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:

Candidate Name: Kim Richards Sigmon
Treasurer Name: Amy Harris Luckadoo
Treasurer Address: 1161 18th Avenue NE
(include city, state, & zip) Hickory, NC 28601

Treasurer Phone: 828-320-7105

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

June
May 05, 2013
Date Signed

Kim R. Sigmon
Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

Candidate Name: Kim Richards Sigmon

Committee Name: Kim Sigmon for Clerk of Superior Court

Treasurer Name: Amy Harris Luckadoo

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

Level Registered: [State] [County] If county, specify: _____

I, Kim Richards Sigmon, hereby direct that in the event of my death or incapacity all
(Name of Candidate)
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

<u>Name of Entity</u> (Select from §163-278.16B(a))	<u>Plan for Disbursement (eg. Amount or %)</u>
1. <u>Christ Alive Church, Newton, NC</u>	<u>100%</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: Kim R. Sigmon

Date: May 28, 2013

Note: This Designation is to be filed with the Election Board where the committee's campaign reports are filed.